

# STATE OF MAINE CHARITABLE SOLICITATIONS

## **Application for Registration: Charitable Organization**



Department of Professional & Financial Regulation  
Office of Licensing & Registration  
35 State House Station  
Augusta, ME 04333-0035

Office Telephone: (207) 624-8624  
Hearing Impaired Line – TTY: 1-888-577-6690  
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### Websites:

Charitable Solicitations URL: [www.state.me.us/pfr/olr/categories/cat10.htm](http://www.state.me.us/pfr/olr/categories/cat10.htm)  
Office of Licensing & Registration URL: [www.state.me.us/pfr/olr/](http://www.state.me.us/pfr/olr/)  
Department of Professional & Financial Regulation URL: [www.maineprofessionalreg.org](http://www.maineprofessionalreg.org)

Office located at: 122 Northern Avenue, Gardiner, Maine, 04345

## **For Your Information**

**The State of Maine accepts, and you may submit, either the Unified Registration Statement or the State of Maine Charitable Organization Registration Form.**

### **What is the Unified Registration Statement?**

The Unified Registration Statement (URS) represents an effort to streamline the collection of information and data by states that require registration of nonprofit organizations performing charitable solicitations within their jurisdictions. The National Association of State Charities Officials and the National Association of Attorneys General together have established the Standardized Reporting Project to facilitate and simplify compliance with State laws.

The Unified Registration Statement form and instructions can be downloaded from the following Internet website (Please be sure to complete the entire form.):

<http://www.multistatefiling.org/>

If you decided to use the URS, then please note that --

- A notarized signature is required.
- You must indicate (e.g. on your cover letter) the estimated percentage of each dollar contribution that will be expended in Maine.
- The fees are:
  - New Registration: \$25 application, \$25 initial registration.
  - Renewal: \$25 registration, \$50 late fee (if applicable -- pertains to renewal within 90 days following the expiration date).
  - No fee attaches to the financial report covering the most-recently audited fiscal year.

### **What is the Charitable Organization Registration Form?**

The State of Maine's Charitable Organization Registration form is an alternative to the Unified Registration Statement. It is attached, but it also can be downloaded from the Charitable Solicitations website:

<http://www.state.me.us/pfr/olr/categories/cat10.htm>

Application & Renewal forms, Annual Fundraising Activity Report forms, and the statute & rules governing the conduct of charitable solicitations in Maine are available there.

**If you have any questions, please contact Marlene M. McFadden by e-mail at [marlene.m.mcfadden@maine.gov](mailto:marlene.m.mcfadden@maine.gov), by phone at (207) 624-8624, by fax at (207) 624-8637 or through our hearing-impaired line at TTY: 1-888-577-6690.**

## Instructions for Application and Renewal: Charitable Organization

A Charitable Organization must be registered with this office prior to conducting solicitation activities, or having contributions solicited on its behalf, in the State of Maine. Qualification as a "Tax Exempt Organization" under IRS regulations does not exempt a Charitable Organization from the registration requirement.

"Charitable Organization" is defined as: "Any person or entity, including any person or entity organized in a foreign state, that is or holds itself out to be organized or operated for any charitable purpose or that solicits, accepts or obtains contributions from the public for any charitable purpose and by any means, including, but not limited to, personal contact, telephone, mail, newspaper advertisement, television, or radio. Status as a tax-exempt entity does not necessarily qualify that entity as a charitable organization. A chapter, branch, area office or similar affiliate or any person soliciting contributions for any charitable purpose within the State for a charitable organization that has its principal place of business outside the State is considered a charitable organization. However, an organization established for and serving bona fide religious purposes is not a charitable organization."

"Contribution" is defined as: "The promise or grant of any money or property of any kind or value, including the payment or promise to pay in consideration of a sale, performance or event of any kind which is advertised in conjunction with the name of any charitable organization. This definition does not include:

- A. Payments by members of an organization for membership fees, dues, fines or assessments, or for services rendered to individual members, if membership in the organization confers a bona fide right, privilege, professional standing, honor or other direct benefits, other than the right to vote, elect officers or hold offices;
- B. Money or property received from any governmental authority; or
- C. Money or property received from a foundation established for charitable or educational purposes."

### Application:

Registrations will not be issued to prospective registrants who submit incomplete applications, or whose applications omit required documentation. All questions on the application must be answered, and supporting documentation must be provided, where requested. Otherwise, the application will be considered incomplete and returned for completion. If you need additional room to answer a question, then please attach a separate sheet of paper to the application and state on the application that you have done so.

The principal officer of the organization must sign this document. Signatures must be original, and all applications must be notarized.

An application for registration or renewal of registration can be denied for fraud, misrepresentation, or deception on an application, or for a violation of any provision of the Charitable Solicitations Act or rules adopted under authority of the Act.

Please check the applicable boxes on the application form for either an initial or a renewal registration.

- Item 1. The legal name provided will be printed on the organization's registration. Be sure to include any other names under which the organization intends to solicit contributions. These names will be printed on the registration as "d/b/a." If there is a reason you prefer that these names not be included, then please furnish an explanation.
- Item 2. Federal ID.
- Item 3. Fill in the complete principal and mailing addresses. All written contact from this office will be sent to your last known mailing address, and you will be responsible for having received it. Be sure to notify this office, promptly and in writing, of any address changes.
- Item 4. You must provide a primary telephone number. Fax numbers, e-mail addresses, and websites also should be provided, if they are available.
- Item 5. Attach a description of the organization's other offices, chapters, branches, and affiliates.
- Item 6. Specify inception and termination of your Fiscal Year.
- Item 7. Provide your organization's date and jurisdiction of incorporation; also indicate if your organization is not incorporated. If the organization is not incorporated, then please indicate its legal structure and specify the date and jurisdiction of its establishment.
- Item 8. If this is an initial registration, or if there have been any changes, please submit a photocopy of the organization's IRS determination letter.
- Item 9. Registration in other states.
- Item 10. Method of solicitation.
- Item 11. Identify the purpose of the organization and describe its program(s). Use a separate sheet of paper, if necessary.
- Item 12. Management information.
- Item 13. Attach a list of the names and addresses of individuals responsible for custody and final distribution of contributions received. The telephone number should be the one at which the individual can be reached during normal business hours.
- Item 14. Indicate the relationship to your organization of personnel used to solicit donations.
- Item 15. If your organization contracts with, or otherwise engages the services of, any outside fund-raising professional (such as a paid "Professional Solicitor," "Fund-raising Counsel," or "Commercial Co-venturer"), then attach a list, including their names, addresses (street & P.O.), telephone numbers, e-mail addresses, and the physical location of offices used by them to perform work on behalf of your organization. Also include fees, expenses, and any other costs paid to the fund-raising professional(s).

Each entry must include a simple statement of: services provided, dates of contract, date of campaign/event, whether the professional solicits on your behalf, and whether the professional at any time has custody or control of donations. (Be sure to verify the entity's registration status at: [http://www.state.me.us/pfr/olr/olr\\_disclaimer.htm](http://www.state.me.us/pfr/olr/olr_disclaimer.htm) before entering into contracts, as all such entities with which you contract also must be registered with this office.) Failure to submit supporting documentation will result in a return of your application for reason of incompleteness.

- Item 16. Total dollar amount of contributions, as defined above, received during the previous Fiscal Year.
- Item 17. Provide the estimated percentage of each dollar contributed that is to be expended in Maine. Do not leave this item blank or designate "N/A."
- Item 18. Court injunctions.

#### Contracts:

If your organization contracts with, or otherwise engages the services of, any outside fund-raising professional (such as a "Professional Solicitor," "Professional Fund-raising Counsel," or "Commercial Co-venturer"), then attach a list, including their names, addresses (street / P.O.), telephone numbers, e-mail addresses, and the physical location of offices used by them to perform work on behalf of your organization. Each entry must include a simple statement of: services provided, dates of contract, date of campaign / event, whether the professional solicits on your behalf, and whether the professional at any time has custody or control of donations.

Before you enter into a contract with an entity to provide fundraising services on your behalf in the State of Maine, please confirm that it is properly registered here. It is illegal for a Charitable Organization to enter into a contract with an unregistered Professional Solicitor, Professional Fundraising Counsel, or Commercial Co-venturer, and doing so could subject you to disciplinary action (9 M.R.S.A., Section 5005-B(3)). Note: An entity that, in exchange for a fee or other compensation, solicits contributions from the public on behalf of a Charitable Organization, exercises custody or control over contributions, or employs someone who does so, must register as a Professional Solicitor, and not as a Professional Fundraising Counsel.

#### Application Fees:

The annual registration fee for a Charitable Organization is \$25. An additional \$25 application fee also is required for your initial registration. All checks and money orders should be made payable to the "Treasurer, State of Maine."

#### Renewal:

Registrations expire on 11/30 of each year. If your renewal registration application is postmarked after that date, then it will be considered late, and you will be charged a \$50 late fee. This would make the total renewal fee \$75. In this event, you would remain eligible to be considered for renewal only until March 1<sup>st</sup>, or within the first 90 days after your registration has lapsed. During the interim (November 30<sup>th</sup> to March 1<sup>st</sup>), you may not conduct activities in Maine. Thereafter, you would be required to make application to become a new registrant, as you would not be eligible for renewal.



STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL  
AND FINANCIAL REGULATION  
**CHARITABLE SOLICITATIONS**  
35 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0035

JOHN ELIAS BALDACCI  
GOVERNOR

ANNE L. HEAD  
DIRECTOR

## CHARITABLE ORGANIZATION REGISTRATION FORM

Please check:

Initial Registration

Renewal

- ☐ Application Fee of \$25  
☐ Initial Registration Fee of \$25

- ☐ Renewal Fee of \$25  
☐ Late Fee of \$50 (if received after 11/30)

Registration Period of one year to begin on November 30, 20\_\_\_\_ and end on November 30, 20\_\_\_\_

1. Organization's legal name: \_\_\_\_\_

If changed since prior filings, name previously used: \_\_\_\_\_

All other name(s) under which it intends to solicit contributions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_

2. Federal ID # (Filer EIN): \_\_\_\_\_

3. Principal / physical address:

Street or P. O. Box: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing address (if different from principal address):

Street or P. O. Box: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

4. Telephone number(s): \_\_\_\_\_

Fax number (if available): \_\_\_\_\_

E-mail (if available): \_\_\_\_\_

Web site (if available): \_\_\_\_\_

5. Does your organization have other offices/chapters/branches/affiliates within the State of Maine?

Yes ☐

No ☐

If "Yes," then on a separate sheet of paper provide the same information for them as you have provided in response to questions # 1 - 4 above.

6. Fiscal year begins / ends: \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_

7. Date incorporated: \_\_\_\_\_ State of incorporation: \_\_\_\_\_

If not incorporated, indicate type of organization, jurisdiction, and date established:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Has the organization applied for or been granted IRS tax-exempt status?

Yes ☐

No ☐

If "Yes," provide date of application: \_\_\_\_\_

OR date of IRS notification letter: \_\_\_\_\_

Please specify section of IRS Tax Code under which exempt status was granted, if other than 501(C) (3): \_\_\_\_\_

(If this is your initial application for registration in Maine as a Charitable Organization, please attach a photocopy of the IRS Determination Letter.)

9. Has your organization been registered or licensed to solicit funds in any other State? (Please attach list.)

Yes ☐

No ☐

10. Indicate all methods of solicitation:

Mail ☐ Phone ☐ E-mail ☐ Website ☐ Personal Contact ☐ Radio/TV Appeals ☐

11. Identify the primary purpose of your organization (check one):

|    |                             |                          |
|----|-----------------------------|--------------------------|
| AN | ANIMAL SHELTER              | <input type="checkbox"/> |
| AR | ART EDUCATION               | <input type="checkbox"/> |
| CH | CHILDREN'S PROGRAMS         | <input type="checkbox"/> |
| CR | CAPITAL RAISING             | <input type="checkbox"/> |
| CU | CULTURAL HERITAGE EDUCATION | <input type="checkbox"/> |
| ED | EDUCATIONAL                 | <input type="checkbox"/> |
| EM | EMERGENCY RELIEF            | <input type="checkbox"/> |
| EN | ENVIRONMENTAL               | <input type="checkbox"/> |
| HE | HEALTHCARE                  | <input type="checkbox"/> |
| HP | HISTORIC PRESERVATION       | <input type="checkbox"/> |
| HU | HUMANITARIAN RELIEF         | <input type="checkbox"/> |
| LA | LEGAL ASSISTANCE            | <input type="checkbox"/> |
| PH | PHILOSOPHICAL               | <input type="checkbox"/> |
| PO | POLITICAL                   | <input type="checkbox"/> |
| RE | RELIGIOUS                   | <input type="checkbox"/> |
| SA | SAFETY PROMOTION            | <input type="checkbox"/> |
| SP | SPORTS PROMOTION            | <input type="checkbox"/> |
| TR | TRAINING & DEVELOPMENT      | <input type="checkbox"/> |
| VA | VETERANS' ASSISTANCE        | <input type="checkbox"/> |
| WP | WILDLIFE PRESERVATION       | <input type="checkbox"/> |
| OT | OTHER                       | <input type="checkbox"/> |

Describe the programs for which funds are solicited. (Attach a separate sheet, if necessary.)

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12. On a separate sheet, list the names, titles, addresses (street or P.O. Box), telephone numbers, and E-mail addresses (if available) of current officers, directors, trustees and principal salaried executive staff officer of your organization.

13. On a separate sheet, list the names, titles, addresses (street or P.O. Box), telephone numbers and E-mail addresses (if available) of individual(s) –

- responsible for custody of contributions received
- responsible for final distribution of contributions received

14. Does the organization use volunteers to solicit directly from the public? Yes ☐ No ☐

Does the organization use contract professionals (who are not employees) to solicit directly from the public? Yes ☐ No ☐



15. List the name and address of any Professional Fund-raising Counsel, Professional Solicitor or Commercial Co-venturer who acts or will act on behalf of the organization, and the terms of remuneration for each.
16. Total Dollar Amount received as contributions (as defined on page #3 of this application) in the last fiscal year: \$ \_\_\_\_\_
17. Provide the estimated percentage of each dollar contribution that will be expended in Maine.  
Maine Percent: \_\_\_\_\_
18. Has your organization ever been enjoined by any court from soliciting contributions?  
Yes ☐ No ☐

If you answered "Yes," then please attach a detailed explanation and copies of all documents.

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Principal Officer(s):

\_\_\_\_\_  
Name (printed / typed)

\_\_\_\_\_  
Name (printed / typed)

\_\_\_\_\_  
Name (signature)

\_\_\_\_\_  
Name (signature)

\_\_\_\_\_  
Title (printed / typed)

\_\_\_\_\_  
Title (printed / typed)

Date \_\_\_\_\_

Date \_\_\_\_\_

Sworn and subscribed to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Jurisdiction in which Signed



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**AUTHORIZATION OF CREDIT CARD PAYMENT**

Fees owed to this Department may be paid by the use of a credit card. If you wish to pay your fee(s) with your credit card, please complete this form and send it with your application. Payment through credit cards will not be processed without this authorization form.

|  |  |                  |
|--|--|------------------|
| <b>Name:</b><br>(applicant fees being paid for)            |  |                  |
| <b>Mailing Address:</b><br>(applicant fees being paid for) |  |                  |
| <b>City:</b>   | <b>State:</b>                            | <b>Zip Code:</b> |
| <b>County:</b>   | <b>Telephone #:</b> (____) _____ - _____ |                  |
| <b>Name of cardholder:</b><br>(if other than applicant)    |  |                  |
| <b>Mailing Address:</b><br>(if other than applicant)       |  |                  |
| <b>City:</b>   | <b>State:</b>                            | <b>Zip Code:</b> |

I authorize the State of Maine, Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my:

☐ Visa      ☐ MasterCard

\_\_\_\_\_ **Card Number**

**Expiration date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **in the amount of: \$** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

## ANNUAL FUNDRAISING ACTIVITY REPORT

Maine's Charitable Solicitations Act requires you to submit an Annual Fundraising Activity Report ("AFAR") to the Office of Licensing and Registration no later than 60 days prior to the expiration date of your current registration (9 M.R.S.A. §5005-B). As the scheduled renewal date of your registration is November 30<sup>th</sup>, this means that your report must be filed by September 30<sup>th</sup>. The information contained in the AFAR pertains to January 1 to December 31 of the preceding year (i.e., 1/1/05 to 12/31/05 for a report filed by 9/30/06).

All information requested must be provided. If it is not, then the form will be returned to you for completion. Renewal registrations will not be issued to registrants who have failed to properly complete and file the AFAR. Failure to complete and file the report may also result in disciplinary action. It is therefore recommended that you submit the report well in advance of the due date, in order to allow time for correction.